## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

serial no. 10/591147

FILING DATE

APPLICANT(S)

## **CLAIMS**

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
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TOTAL DEP.	9	<b>+</b>	11	<b>+</b>	11	<b>(</b>
TOTAL CLAIMS	10	\$* · · · ·	17		17	

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TOTAL CLAIMS	0		0		0					
U.S. DEPARTMENT of COMMERCE										

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